

AO 240 (Rev. 10/03)
DELAWARE (Rev. 4/05)UNITED STATES DISTRICT COURT
DISTRICT OF DELAWAREKevin C. Brathwaite

Plaintiff

V.

Correctional Medical Services

Defendant(s)

APPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVITCASE NUMBER: 07-006I, Kevin C. Brathwaite declare that I am the (check appropriate box)
☒ Petitioner/Plaintiff/Movant
 ☐ Other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915, I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☒ Yes ☐ No (If "No" go to Question 2)If "YES" state the place of your incarceration Delaware Corr. CenterInmate Identification Number (Required): 315294Are you employed at the institution? yes Do you receive any payment from the institution? yesAttach a ledger sheet from the institution of your incarceration showing at least the past six months' transactions2. Are you currently employed? ☐ Yes ☒ No

a. If the answer is "YES" state the amount of your take-home salary or wages and pay period a and give the name and address of your employer.

b. If the answer is "NO" state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

3. In the past 12 twelve months have you received any money from any of the following sources?

a. Business, profession or other self-employment	<input type="radio"/> Yes	<input type="radio"/> No
b. Rent payments, interest or dividends	<input type="radio"/> Yes	<input type="radio"/> No
c. Pensions, annuities or life insurance payments	<input type="radio"/> Yes	<input type="radio"/> No
d. Disability or workers compensation payments	<input type="radio"/> Yes	<input type="radio"/> No
e. Gifts or inheritances	<input checked="" type="radio"/> Yes	<input type="radio"/> No
f. Any other sources	<input type="radio"/> Yes	<input type="radio"/> No

If the answer to any of the above is "YES" describe each source of money and state the amount received AND what you expect you will continue to receive.

From Family \$70⁰⁰

2007 JAN -5 PM 3:05
DISTRICT OF DELAWARE

AO 240 Revnse (Rev. 10/03)
DELAWARE, Rev. 4/05

4. Do you have any cash or checking or savings accounts?

• • Yes

• • No

If "Yes" state the total amount \$ _____

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property?

• • Yes

• • No

If "Yes" describe the property and state its value.


N/A

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support, OR state *NONE* if applicable.

K. C. B1
\$30⁰⁰ per month

I declare under penalty of perjury that the above information is true and correct.

12-24-06
DATE


SIGNATURE OF APPLICANT

NOTE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

DELAWARE CORRECTIONAL CENTER
SUPPORT SERVICES OFFICE
MEMORANDUM

07-006

TO: Kevin Brachante SBI#: 315294

FROM: Stacy Shane, Support Services Secretary

RE: **6 Months Account Statement**

DATE: December 28, 2006

Attached are copies of your inmate account statement for the months of June 1, 2006 to November 30, 2006.

The following indicates the average daily balances.

<u>MONTH</u>	<u>AVERAGE DAILY BALANCE</u>
<u>June</u>	<u>188.25</u>
<u>July</u>	<u>217.54</u>
<u>Aug</u>	<u>173.12</u>
<u>Sept</u>	<u>175.97</u>
<u>Oct</u>	<u>199.20</u>
<u>Nov</u>	<u>230.15</u>

Average daily balances/6 months: _____

Attachments

CC: File

Stacy Shane
12/28/06

Carolanne
12/28/06

Date Printed: 12/28/2006

Total Amount Currently on Medical Hold:	\$0.00
Total Amount Currently on Non-Medical Hold:	\$0.00

Individual Statement

Date Printed: 12/28/2006

For Month of July 2006

SBI	Last Name	First Name	MI	Suffix	Beg Mth Balance:	MO # or Ck #	PayTo	SourceName
00315294	Braithwaite	Kevin			\$217.01			
Current Location: 17		Comments: QOL3						
Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #		
Canteen	7/5/2006	(\$29.76)	\$0.00	\$0.00	\$187.25	287138		
Mail	7/12/2006	\$100.00	\$0.00	\$0.00	\$287.25	290743		E. JOHNSON
Canteen	7/18/2006	(\$29.99)	\$0.00	\$0.00	\$257.26	292398		
Mail	7/18/2006	\$30.00	\$0.00	\$0.00	\$287.26	293070		A. SERPA
Supplies-MailP	7/19/2006	(\$0.39)	\$0.00	\$0.00	\$286.87	293895	6/18/06	
Supplies-MailP	7/19/2006	(\$0.39)	\$0.00	\$0.00	\$286.48	294047	6/8/06	
Supplies-MailP	7/19/2006	(\$0.39)	\$0.00	\$0.00	\$286.09	294046	6/8/06	
Supplies-MailP	7/19/2006	(\$0.39)	\$0.00	\$0.00	\$285.70	294152	6/22/06	
Pay-To	7/19/2006	(\$200.00)	\$0.00	\$0.00	\$85.70	294835	SUN NATIONAL BAN	
Mail	7/20/2006	\$80.00	\$0.00	\$0.00	\$165.70	295391		UNK
Mail	7/20/2006	\$40.00	\$0.00	\$0.00	\$205.70	295392		UNK
Supplies-MailP	7/21/2006	\$0.00	\$0.00	(\$1.11)	\$205.70	295837	7/18/06	
Supplies-MailP	7/25/2006	\$0.00	\$0.00	(\$0.39)	\$205.70	296941	7/23/06	
Ending Mth Balance:					\$205.70			

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Non-Medical Hold: \$0.00

Individual Statement

Date Printed: 12/28/2006

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For Month of August 2006

SBI	Last Name	First Name	MI	Suffix	Beg Mth Balance:	MO # or Ck #	Trans #	Balance	MO # or Ck #	PayTo	SourceName
00315294	Braithwaite	Kevin			\$205.70						
Current Location: 17		Comments: QOL3									
Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO # or Ck #	PayTo	SourceName		
Canteen	8/1/2006	(\$29.28)	\$0.00	\$0.00	\$176.42	299641					
Pay-To	8/2/2006	(\$5.00)	\$0.00	\$0.00	\$171.42	301108		US DISTRICT COURT			
Supplies-MailP	8/4/2006	\$0.00	\$0.00	(\$4.05)	\$171.42	301832		7/31/06			
Canteen	8/8/2006	(\$0.90)	\$0.00	\$0.00	\$170.52	302987					
Supplies-MailP	8/9/2006	\$0.00	\$0.00	(\$0.39)	\$170.52	303894		8/7/06			
Supplies-MailP	8/10/2006	\$0.00	\$0.00	(\$5.00)	\$170.52	304686		8/1/06			
Supplies-MailP	8/10/2006	\$0.00	\$0.00	(\$0.39)	\$170.52	304696		8/1/06			
Supplies-MailP	8/11/2006	(\$1.11)	\$0.00	\$0.00	\$169.41	305281		7/18/06			
Supplies-MailP	8/11/2006	(\$0.39)	\$0.00	\$0.00	\$169.02	305407		7/23/06			
Supplies-MailP	8/11/2006	(\$4.05)	\$0.00	\$0.00	\$164.97	305594		7/31/06			
Supplies-MailP	8/11/2006	(\$0.39)	\$0.00	\$0.00	\$164.58	305806		8/7/06			
Supplies-MailP	8/11/2006	(\$5.00)	\$0.00	\$0.00	\$159.58	305820		8/1/06			
Supplies-MailP	8/11/2006	(\$0.39)	\$0.00	\$0.00	\$159.19	305823		8/1/06			
Mail	8/14/2006	\$50.00	\$0.00	\$0.00	\$209.19	306173	51010941564		M. C. KING		
Canteen	8/15/2006	(\$29.57)	\$0.00	\$0.00	\$179.62	306804					
Supplies-MailP	8/16/2006	\$0.00	\$0.00	(\$0.39)	\$179.62	306999		8/11/06			
Supplies-MailP	8/23/2006	\$0.00	\$0.00	(\$0.63)	\$179.62	309918		8/17/06			
Canteen	8/29/2006	(\$30.00)	\$0.00	\$0.00	\$149.62	311510					
								Ending Mth Balance:	\$149.62		

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Non-Medical Hold: \$0.00

Individual Statement

Date Printed: 12/28/2006

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For Month of September 2006

SBI	Last Name	First Name	MI	Suffix	Beg Mth Balance:	MO # or Ck #	Trans #	Balance	PayTo	SourceName
00315294	Braithwaite	Kevin			\$149.62					
Current Location: 17		Comments: QOL3								
Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO # or Ck #	PayTo	SourceName	
Supplies-MailP	9/6/2006	\$0.00	\$0.00	(\$0.39)	\$149.62	315521		8/20/06		
Supplies-MailP	9/6/2006	\$0.00	\$0.00	(\$0.39)	\$149.62	315552		8/21/06		
Supplies-MailP	9/6/2006	\$0.00	\$0.00	(\$0.39)	\$149.62	315554		8/20/06		
Mail	9/7/2006	\$65.00	\$0.00	\$0.00	\$214.62	316549	428670867		E. JOHNSON	
Supplies-MailP	9/8/2006	(\$0.39)	\$0.00	\$0.00	\$214.23	316958		8/11/06		
Supplies-MailP	9/8/2006	(\$0.63)	\$0.00	\$0.00	\$213.60	317176		8/17/06		
Supplies-MailP	9/8/2006	(\$0.39)	\$0.00	\$0.00	\$213.21	317578		8/20/06		
Supplies-MailP	9/8/2006	(\$0.39)	\$0.00	\$0.00	\$212.82	317619		8/20/06		
Supplies-MailP	9/8/2006	(\$0.39)	\$0.00	\$0.00	\$212.43	317618		8/21/06		
Canteen	9/12/2006	(\$29.97)	\$0.00	\$0.00	\$182.46	318289				
Supplies-MailP	9/21/2006	\$0.00	\$0.00	(\$0.87)	\$182.46	322390		9/10/06		
Supplies-MailP	9/21/2006	\$0.00	\$0.00	(\$0.39)	\$182.46	322569		9/10/06		
Supplies-MailP	9/21/2006	\$0.00	\$0.00	(\$0.39)	\$182.46	322798		9/13/06		
Canteen	9/26/2006	(\$29.96)	\$0.00	\$0.00	\$152.50	323905				
					Ending Mth Balance:		\$152.50			

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Non-Medical Hold: \$0.00

Date Printed: 12/28/2006

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Individual Statement**For Month of October 2006**

SBI	Last Name	First Name	MI	Suffix	Beg Mth Balance:	MO # or Ck #	PayTo	SourceName
00315294	Braithwaite	Kevin			\$152.50			
Current Location: 17		Comments: QOL3						
Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO # or Ck #	PayTo
Mail	10/2/2006	\$75.00	\$0.00	\$0.00	\$227.50	327069	428670993	E. JOHNSON
Supplies-MailP	10/10/2006	\$0.00	\$0.00	(\$0.39)	\$227.50	329803		10/2/06
Canteen	10/10/2006	(\$29.98)	\$0.00	\$0.00	\$197.52	330652		
Supplies-MailP	10/20/2006	(\$0.87)	\$0.00	\$0.00	\$196.65	335446		9/10/06
Supplies-MailP	10/20/2006	(\$0.39)	\$0.00	\$0.00	\$196.26	335569		9/10/06
Supplies-MailP	10/20/2006	(\$0.39)	\$0.00	\$0.00	\$195.87	335634		9/13/06
Supplies-MailP	10/20/2006	(\$0.39)	\$0.00	\$0.00	\$195.48	336157		10/2/06
Canteen	10/24/2006	(\$14.78)	\$0.00	\$0.00	\$180.70	336957		
Supplies-MailP	10/24/2006	\$0.00	\$0.00	(\$1.35)	\$180.70	337434		10/22/06
Supplies-MailP	10/24/2006	\$0.00	\$0.00	(\$0.87)	\$180.70	337455		10/22/06
Ending Mth Balance:					\$180.70			

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Non-Medical Hold: \$0.00

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Individual Statement

For Month of November 2006

Date Printed: 12/28/2006

SBI	Last Name	First Name	MI	Suffix	Beg Mth Balance:	\$180.70
00315294	Braithwaite	Kevin				
Current Location:	17	Comments: QOL3				

Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO # or Ck #	PayTo	SourceName
Wage-1099	11/1/2006	\$9.60	\$0.00	\$0.00	\$190.30	339327		SHU 17 9/24-10/23/06	
Mail	11/1/2006	\$30.00	\$0.00	\$0.00	\$220.30	341178	10385259557		MRS, DOUGLAS
Supplies-MailP	11/3/2006	(\$1.35)	\$0.00	\$0.00	\$218.95	342169		10/22/06	
Supplies-MailP	11/3/2006	(\$0.87)	\$0.00	\$0.00	\$218.08	342185		10/22/06	
Canteen	11/8/2006	(\$14.89)	\$0.00	\$0.00	\$203.19	343085			
Mail	11/14/2006	\$50.00	\$0.00	\$0.00	\$253.19	346017	56103015452		E. JOHNSON
Supplies-MailP	11/17/2006	\$0.00	\$0.00	(\$1.02)	\$253.19	348061		11/8/06	
Canteen	11/21/2006	(\$15.00)	\$0.00	\$0.00	\$238.19	348690			
Ending Mth Balance:					\$238.19				

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Non-Medical Hold: \$0.00